## GOVERNMENT OF ANDHRA PRADESH

## ABSTRACT

HM&FW Department - Budget Estimates 2025-26 - Administrative sanction for an amount of Rs. 4,26,16,67,000 /- (Rupees Four hundred twenty six crore sixteen lakh sixty seven thousand) to Family Welfare Department - Orders - Issued

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## HEALTH, MEDICAL AND FAMILY WELFARE (E1) DEPARTMENT

**G.O.RT.No. 415** **Dated: 25-06-2025**

**Read:**

G.O.Rt.No.2049, Finance (FMU.HM&FW) Dept., dt.25.06.2025.

**& & &**

**O R D E R :**

In pursuance of the BRO issued by the Finance (PMU-HM&FW) Department in the G.O read above, Government hereby accord Administrative Sanction to the Commissioner, Health & Family Welfare, A.P., Mangalagiri, for an amount of Rs.4,26,16,67,000 /- (Rupees Four hundred twenty six crore sixteen lakh sixty seven thousand) from the BE provision 2025-26 for the purpose of meeting the expenditure under the Scheme Flexible Pool for RCH & Health System Strengthening, National Health Programme and Urban Health Mission under National Health Mission for the Financial Year 2025-26 in relaxation of quarterly regulation orders, duly adjustment to SNA Account of 9156 PFMS SNA HMF NRHM AP115; 013412010000252; IFSC Code.UBIN0801348; Union Bank of India, Ring Road, Vijayawada.

**(Rs.in Lakhs)**

| S.No. | Head of Account | Charged/ Voted | Provision in BE 2025-26 | Additional Amounts Sanctioned | Amount Reappro -priated | Total Provision in BE 2025-26 | Amount Already Authorised | Amount Authorised Now | Balance Amount Available |
|---|---|---|---|---|---|---|---|---|---|
| **Scheme Name:** | Flexible Pool for RCH & Health System Strengthening National Health Programme and national urban health Mission [AP115] | | | | | | | | |
| **Procedure of Drawl of Funds:** | Transfer to the SNA Bank Account | | | | | | | | |
| **Drawing Officer:** | Concerned DDO | | | | | | | | |
| **Remarks:** | towards Flexible Pool for RCH & Health System Stre | | | | | | | | |
| **SNA Bank Account:** | 013412010000252 . IFSC_CODE: UBIN0801348 , | | | | | | | | |
| **GoI Sanction Detail:** | 1 . G.27017/46/2025-26/NHM-Finance/FTS-8339251 GoI, MoHFW, Dt. 16.06.25 , | | | | | | | | |
| 1 | 2211002000620310312 | V | 83,426.13 | 0.00 | 0.00 | 83,426.13 | 8,269.63 | 13,056.67 | 62,099.83 |
| **Scheme Name:** | Flexible Pool for RCH & Health System Strengthening National Health Programme and national urban health Mission [AP115] | | | | | | | | |
| **Procedure of Drawl of Funds:** | Transfer to the SNA Bank Account | | | | | | | | |
| **Drawing Officer:** | Concerned DDO | | | | | | | | |
| **Remarks:** | towards Flexible Pool for RCH & Health System Stre | | | | | | | | |
| **SNA Bank Account:** | 013412010000252 . IFSC_CODE: UBIN0801348 , | | | | | | | | |
| **GoI Sanction Detail:** | 1 . G.27017/46/2025-26/NHM-Finance/FTS-8339251 GoI, MoHFW, Dt. 16.06.25 , | | | | | | | | |
| 2 | 2211002001220310312 | V | 81,178.12 | 0.00 | 0.00 | 81,178.12 | 6,110.10 | 19,585.00 | 55,483.02 |
| **Scheme Name:** | Flexible Pool for RCH & Health System Strengthening National Health Programme and national urban health Mission [AP115] | | | | | | | | |
| **Procedure of Drawl of Funds:** | Transfer to the SNA Bank Account | | | | | | | | |
| **Drawing Officer:** | Concerned DDO | | | | | | | | |
| **Remarks:** | towards Flexible Pool for RCH & Health System Stre | | | | | | | | |
| **SNA Bank Account:** | 013412010000252 . IFSC_CODE: UBIN0801348 , | | | | | | | | |
| **GoI Sanction Detail:** | 1 . G.27017/46/2025-26/NHM-Finance/FTS-8339251 GoI, MoHFW, Dt. 16.06.25 , | | | | | | | | |
| 3 | 2211007890620310312 | V | 18,466.61 | 0.00 | 0.00 | 18,466.61 | 3,277.42 | 2,797.33 | 12,391.86 |
| **Scheme Name:** | Flexible Pool for RCH & Health System Strengthening National Health Programme and national urban health Mission [AP115] | | | | | | | | |
| **Procedure of Drawl of Funds:** | Transfer to the SNA Bank Account | | | | | | | | |
| **Drawing Officer:** | Concerned DDO | | | | | | | | |
| **Remarks:** | towards Flexible Pool for RCH & Health System Stre | | | | | | | | |
| **SNA Bank Account:** | 013412010000252 . IFSC_CODE: UBIN0801348 , | | | | | | | | |
| **GoI Sanction Detail:** | 1 . G.27017/46/2025-26/NHM-Finance/FTS-8339251 GoI, MoHFW, Dt. 16.06.25 , | | | | | | | | |
| 4 | 2211007891220310312 | V | 27,699.91 | 0.00 | 0.00 | 27,699.91 | 3,889.90 | 4,196.00 | 19,614.01 |
| **Scheme Name:** | Flexible Pool for RCH & Health System Strengthening National Health Programme and national urban health Mission [AP115] | | | | | | | | |
| **Procedure of Drawl of Funds:** | Transfer to the SNA Bank Account | | | | | | | | |
| **Drawing Officer:** | Concerned DDO | | | | | | | | |
| **Remarks:** | towards Flexible Pool for RCH & Health System Stre | | | | | | | | |
| **SNA Bank Account:** | 013412010000252 . IFSC_CODE: UBIN0801348 , | | | | | | | | |

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| **GoI Sanction Detail:** | 1 . G.27017/46/2025-26/NHM-Finance/FTS-8339251 GoI, MoHFW, Dt. 16.06.25 . | | | | | | | | |
| 5 | 2211007960620310312 | V | 7,080.34 | 0.00 | 0.00 | 7,080.34 | 563.20 | 1,192.67 | 5,324.47 |
| **Scheme Name:** | Flexible Pool for RCH & Health System Strengthening National Health Programme and national urban health Mission [AP115] | | | | | | | | |
| **Procedure of Drawl of Funds:** | Transfer to the SNA Bank Account | | | | | | | | |
| **Drawing Officer:** | Concerned DDO | | | | | | | | |
| **Remarks:** | towards Flexible Pool for RCH & Health System Stre | | | | | | | | |
| **SNA Bank Account:** | 013412010000252 . IFSC_CODE: UBIN0801348 , | | | | | | | | |
| **GoI Sanction Detail:** | 1 . G.27017/46/2025-26/NHM-Finance/FTS-8339251 GoI, MoHFW, Dt. 16.06.25 , | | | | | | | | |
| 6 | 2211007961220310312 | V | 12,105.89 | 0.00 | 0.00 | 12,105.89 | 0.00 | 1,789.00 | 10,316.89 |
| | | **Total** | **2,29,957.00** | **0.00** | **0.00** | **2,29,957.00** | **22,110.25** | **42,616.67** | **1,65,230.08** |

2. The Commissioner, Health & Family Welfare, A.P., Mangalagiri shall take necessary action in the matter and to utilize the funds for the intended purpose duly following the prescribed procedure and furnish the utilization certificate / Grant transfer Certificate / Statement of Expenditure for the amount sanctioned at para-1 above to Government.

**(BY ORDER AND IN THE NAME OF THE GOVERNOR OF ANDHRA PRADESH)**

**M T KRISHNA BABU**
**SPECIAL CHIEF SECRETARY TO GOVERNMENT**

**To**
The Commissioner, Health & Family Welfare, A.P., Mangalagiri.
The Director of Treasuries & Accounts, A.P, Mangalagiri.
The Director Works and Accounts, A.P, Mangalagiri.
The Pay & Accounts Officer, A.P, Mangalagiri.
The Principal Accountant General (A&E), A.P, Vijayawada.
The Principal Accountant General (Civil Audit), A.P, Vijayawada.
**Copy to:-**
The Finance (FMU-HM&FW) Department.
The P.S to Special Chief Secretary to Government, HM&FW Department,
A.P Secretariat.
Sf/Sc (2878774)

**//FORWARDED::BY ORDER//**

**SECTION OFFICER**